

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

10/553149
APPLICANT(S)

FILING DATE

16 OCT 2006

CLAIMS

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 3 rd AMENDMENT | |
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| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| 3 | | 2 | | 1 | | |
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| 7 | 1 | | 1 | | | |
| 8 | | 1 | | 1 | | |
| 9 | | 0 | | 1 | | |
| 10 | | 0 | | 1 | | |
| 11 | | 0 | | 1 | | |
| 12 | | 0 | | 1 | | |
| 13 | | 0 | | 1 | | |
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| TOTAL DEP. | 20 | ← | 19 | ← | | ← |
| TOTAL CLAIMS | 23 | | 22 | | | |

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 3 rd AMENDMENT | |
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| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| TOTAL IND. | | ↓ | | ↓ | | ↓ |
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| TOTAL CLAIMS | | | | | | |